

**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)**

SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

|                 | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|-----------------|----------|------|------------------------|------|------------------------|------|
|                 | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1               |          |      |                        |      |                        |      |
| 2               |          |      |                        |      |                        |      |
| 3               |          |      |                        |      |                        |      |
| 4               |          |      |                        |      |                        |      |
| 5               |          |      |                        |      |                        |      |
| 6               |          |      |                        |      |                        |      |
| 7               |          |      |                        |      |                        |      |
| 8               |          |      |                        |      |                        |      |
| 9               |          |      |                        |      |                        |      |
| 10              |          |      |                        |      |                        |      |
| 11              |          |      |                        |      |                        |      |
| 12              |          |      |                        |      |                        |      |
| 13              |          |      |                        |      |                        |      |
| 14              |          |      |                        |      |                        |      |
| 15              |          |      |                        |      |                        |      |
| 16              |          |      |                        |      |                        |      |
| 17              |          |      |                        |      |                        |      |
| 18              |          |      |                        |      |                        |      |
| 19              |          |      |                        |      |                        |      |
| 20              |          |      |                        |      |                        |      |
| 21              |          |      |                        |      |                        |      |
| 22              |          |      |                        |      |                        |      |
| 23              |          |      |                        |      |                        |      |
| 24              |          |      |                        |      |                        |      |
| 25              |          |      |                        |      |                        |      |
| 26              |          |      |                        |      |                        |      |
| 27              |          |      |                        |      |                        |      |
| 28              |          |      |                        |      |                        |      |
| 29              |          |      |                        |      |                        |      |
| 30              |          |      |                        |      |                        |      |
| 31              |          |      |                        |      |                        |      |
| 32              |          |      |                        |      |                        |      |
| 33              |          |      |                        |      |                        |      |
| 34              |          |      |                        |      |                        |      |
| 35              |          |      |                        |      |                        |      |
| 36              |          |      |                        |      |                        |      |
| 37              |          |      |                        |      |                        |      |
| 38              |          |      |                        |      |                        |      |
| 39              |          |      |                        |      |                        |      |
| 40              |          |      |                        |      |                        |      |
| 41              |          |      |                        |      |                        |      |
| 42              |          |      |                        |      |                        |      |
| 43              |          |      |                        |      |                        |      |
| 44              |          |      |                        |      |                        |      |
| 45              |          |      |                        |      |                        |      |
| 46              |          |      |                        |      |                        |      |
| 47              |          |      |                        |      |                        |      |
| 48              |          |      |                        |      |                        |      |
| 49              |          |      |                        |      |                        |      |
| 50              |          |      |                        |      |                        |      |
| TOTAL<br>IND.   |          |      |                        |      |                        |      |
| TOTAL<br>DEP.   |          |      |                        |      |                        |      |
| TOTAL<br>CLAIMS |          |      |                        |      |                        |      |

|                  | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|------------------|----------|------|------------------------|------|------------------------|------|
|                  | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 51               |          |      |                        |      |                        |      |
| 52               |          |      |                        |      |                        |      |
| 53               |          |      |                        |      |                        |      |
| 54               |          |      |                        |      |                        |      |
| 55               |          |      |                        |      |                        |      |
| 56               |          |      |                        |      |                        |      |
| 57               |          |      |                        |      |                        |      |
| 58               |          |      |                        |      |                        |      |
| 59               |          |      |                        |      |                        |      |
| 60               |          |      |                        |      |                        |      |
| 61               |          |      |                        |      |                        |      |
| 62               |          |      |                        |      |                        |      |
| 63               |          |      |                        |      |                        |      |
| 64               |          |      |                        |      |                        |      |
| 65               |          |      |                        |      |                        |      |
| 66               |          |      |                        |      |                        |      |
| 67               |          |      |                        |      |                        |      |
| 68               |          |      |                        |      |                        |      |
| 69               |          |      |                        |      |                        |      |
| 70               |          |      |                        |      |                        |      |
| 71               |          |      |                        |      |                        |      |
| 72               |          |      |                        |      |                        |      |
| 73 <sup>re</sup> |          |      |                        |      |                        |      |
| 74               |          |      |                        |      |                        |      |
| 75               |          |      |                        |      |                        |      |
| 76               |          |      |                        |      |                        |      |
| 77               |          |      |                        |      |                        |      |
| 78               |          |      |                        |      |                        |      |
| 79               |          |      |                        |      |                        |      |
| 80               |          |      |                        |      |                        |      |
| 81               |          |      |                        |      |                        |      |
| 82               |          |      |                        |      |                        |      |
| 83               |          |      |                        |      |                        |      |
| 84               |          |      |                        |      |                        |      |
| 85               |          |      |                        |      |                        |      |
| 86               |          |      |                        |      |                        |      |
| 87               |          |      |                        |      |                        |      |
| 88               |          |      |                        |      |                        |      |
| 89               |          |      |                        |      |                        |      |
| 90               |          |      |                        |      |                        |      |
| 91               |          |      |                        |      |                        |      |
| 92               |          |      |                        |      |                        |      |
| 93               |          |      |                        |      |                        |      |
| 94               |          |      |                        |      |                        |      |
| 95               |          |      |                        |      |                        |      |
| 96               |          |      |                        |      |                        |      |
| 97               |          |      |                        |      |                        |      |
| 98               |          |      |                        |      |                        |      |
| 99               |          |      |                        |      |                        |      |
| 100              |          |      |                        |      |                        |      |
| TOTAL<br>IND.    |          |      |                        |      |                        |      |
| TOTAL<br>DEP.    |          |      |                        |      |                        |      |
| TOTAL<br>CLAIMS  |          |      |                        |      |                        |      |

PTO-1360 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE  
Patent and Trademark Office

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SERIAL NO.

FILING DATE

APPLICANT(S)

**CLAIMS**

|              | AS FILED |      | AFTER<br>1st AMENDMENT |      | AFTER<br>2nd AMENDMENT |      |
|--------------|----------|------|------------------------|------|------------------------|------|
|              | IND.     | DEP. | IND.                   | DEP. | IND.                   | DEP. |
| 1            |          |      |                        |      |                        |      |
| 2            |          |      |                        |      |                        |      |
| 3            |          |      |                        |      |                        |      |
| 4            |          |      |                        |      |                        |      |
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| 50           |          |      |                        |      |                        |      |
| TOTAL IND.   |          |      |                        |      |                        |      |
| TOTAL DEP.   |          |      |                        |      |                        |      |
| TOTAL CLAIMS |          |      |                        |      |                        |      |

|              | *    |      | *    |      | *    |      |
|--------------|------|------|------|------|------|------|
|              | IND. | DEP. | IND. | DEP. | IND. | DEP. |
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| 98           |      |      |      |      |      |      |
| 99           |      |      |      |      |      |      |
| 100          |      |      |      |      |      |      |
| TOTAL IND.   |      |      |      |      |      |      |
| TOTAL DEP.   |      |      |      |      |      |      |
| TOTAL CLAIMS |      |      |      |      |      |      |